## United States of America

## Department of Transportation—Federal Aviation Administration

## Supplemental Type Certificate

Number SA 3987 SW-D

This certificate, issued to

American Airlines, Inc.

P. O. Box 582809

MD 208

Tulsa, Oklahoma 74158-2809

cortifies that the change in the type design for the following product with the limitations and conditions

therefor as specified hereon meets the airworthiness requirements of Part 25

of the Federal Aviation

Regulations.

Original Product - Trype Certificate Number:

A35EU

Make:

Airbus Industrie

Model:

A300B4-605R

Description of Type Design Change:

Modify the Air Conditioning system to install two Ozone Converters in accordance with ECO E0655XX dated 10/21/96 and two Prototype Revision Forms 7721-3 dated 11/21/96 and 12/6/96 or later DAS1SW approved revision.

## Limitations and Conditions:

This approval should not be incorporated in any aircraft of this specific model until compatibility of this modification with previously approved modifications has been determined by the installer.

This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked, or a termination date is otherwise established by the Administrator of the Tederal Aviation Administration.

Date of application:

9/27/96

Sale reissued:

Date of issuance :

12/9/96

Tale amended:

4/22/97

TO MAISTRAL OF

By direction of the Administrator

E.J. Grewe (Signature)

DAS1SW Coordinator

(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

the transfer of this Supplemental Type Certificate.	low may be used to notify the appropriate FAA Regional Office.
The FAA will reissue the certificate in the name of the transferee and forward it to him.  TRANSFER ENDORSEMENT	
Transfer the ownership of Supplemental T	ype Certificate Number
to (Name of transferee)	
(Address of transferee)	(Number and street)
	(City, State, and ZIP code)
from (Name of grantor) (Print or type)	
(Address of grantor)	
	(Number and street)
	(City, State, and ZIP code)
Extent of Authority (if licensing agreemen	nt):
Date of Transfer:	······································
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Signature of grantor (In ink):	